FEDERAL COMMUNICATIONS COMMISSION Washington, DC 20554

Approved by OMB 3060-0076
Est. time per response: 1 hour

COMMON CARRIER ANNUAL EMPLOYMENT REPORT [Please read instructions before completing and for Notice regarding public burden.]

SECTION 1 - General Information 1. Name and Mailing Address of Respondent	n Respondent														
CRST TELEPHONE AUTHORITY PO BOX 810 EAGLE BUTTE, SD 57625	AUTHOF 57625	YTY											Che is a	Check here if this is a change of address.	
2. Year Report Filed 2019		3. Reporting Period Co 05/11	Reporting Period (Ending Deriod Covered by Report) 05/11/2019	3. Reporting Period (Ending Date of Pay Period Covered by Report) 05/11/2019	у		4. Number of Full-Time Employees during Selected Reporting Period (check one): a. Ever than 16 (complete Sections I, IV, and III) A complete Sections III (complete Sections IIII) Ever than 16 (complete Sections IIIII) Ever than 16 (complete Sections IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	Number of Full-Time Employees during S Reporting Period (check one): Begin Tewer than 16 (complete Sections)	mployees du k one): complete Se	per of Full-Time Employees during Selected ting Period (check one): Fewer than 16 (complete Sections I, IV, and V only)	d V only)				
SECTION II - Full-Time Employees.	95.						5	of High (coll	picto all occ	nonsy					
							Number of Employees (Report employees in only one category)	ber of Emplo	yees one categon	5					
Job								Race/Ethnicity							
Categories	Hisp	Hispanic or						Not-Hispanic or Latino	ic or Latino						Total
		ā			Male	е				-	Female	nale			Columns
	Male	Female	White	Black or African American	Native Hawaiian or Other Pacific Islander	Asian	American Indian or Alaska Native	Two or more races	White	Black or African American	Native Hawaiian or Other Pacific	Asian	American Indian or Alaska Native	Two or more races	2
	Þ	В	0	D	Е	п	G	I	=	د	~	٦	3	z	0
Executive/Senior Level Officials and Managers 1.1								=					-	-	-
First/Mid-Level Officials and 1.2 Managers		v					2								2
Professionals 2			x 8				-			-					-
Technicians 3							9						1		10
Sales Workers 4										-			6		6
Administrative Support Workers 5				1									w		ω
Craft Workers 6												7			0
Operatives 7															0
Laborers and Helpers 8															0
Service Workers 9						-						1	1		-
TOTAL 10	0	0	0	0	0	0	12	0	0	0	0	0	12	0	24
PREVIOUS YEAR TOTAL 11							12				ti	1	11		23
												-		FCC 395 Revised December 2007	FCC 395 ember 2007

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								(Report empl	(Report employees in only one category)	one category	5					
Job									Race/Ethnicity	,						
Categories		Hispanic or	_						Not-Hispanic or Latino	ic or Latino						Total
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j'	Male		Female	White	Black or African American	Native Hawaiian or Other Pacific Islander	Asian	American Indian or Alaska Native	Two or more races	White	Black or African American	Native Hawaiian or Other Pacific	Asian	American Indian or Alaska Native	Two or more races	Ž
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Executive/Senior Level Officials and Managers	1.1															0
First/Mid-Level Officials and Managers	1.2			-												0
Professionals	2			-												0
Technicians	ω															0
Sales Workers	_4_															0
Administrative Support Workers	5		-	-												0
Craft Workers	6															0
Operatives	7															0
Laborers and Helpers	σ.					- 1										0
Service Workers	9							1								-
TOTAL	10 0		0	0	0	0	0	1	0	0	0	0	0	0	0	-
PREVIOUS YEAR TOTAL								-	18.41							-
SECTION IV - Report of Discrimination Complaints Pursuant to 47 CFR 22.321, 23.55, 90.168, 101.4, and 101.311.	nination C	omplaints	Pursuant	to 47 CFR	22.321, 23.5	5, 90.168, 101	.4, and 101	.311.								
This is to advise the Commission that no complaints regarding violations of the equal employment provisions of Federal, state, territorial, or local statutes have been filed against this company before any body having competent jurisdiction in such matters during the calendar year covered by this report. This is to advise the Commission that the following complaints alleging violations of the provisions of any equal employment opportunity statute have been filed against this company (Attach a list indicating parties involved, date filed, courts or agencies before which the matter has been heard, file number or other designation, and current status or disposition.	Commiss y body hav Commiss ing parties	ion that no ining compet ion that the involved, d	complaints ent jurisdic following o ate filed, c	regarding thing in such complaints a courts or age	violations of t matters duri alleging viola ancies before	he equal empling the calendations of the prowhich the ma	oyment provar year cove	visions of Fede red by this repo ny equal emplo n heard, file nu	ral, state, terri ort. yment opport mber or other	torial, or loca unity statute designation	al statutes hav have been file , and current s	utes have been filed against this been filed against this company.	gainst this company.			
SECTION V - Certification I certify that to the best of my knowledge, information, and belief, all statements in this report are true and correct.	owledge, in	nformation,	and belief,	all stateme	nts in this rep	ort are true ar	nd correct.									
Date T1 05/17/2019 1	yped or Printed Non MONA L.	Typed or Printed Name of Person Signing MONA L. THOMPSON	ame of Person Signing THOMPSON	Signing			Signature	m g	m	2007			Telephone No. (605) 96	elephone No. (605) 964-2600		
Title of Person Signing GENERAL MANAGER	GER	-			WILLFULLY OF ANY ST/	FALSE STATI	EMENTS M	WILLFULLY FALSE STATEMENTS MADE ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (18 U.S.C. 1001) AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (47 U.S.C. 312 (A)(1) AND/OR FORFEITURE (47 U.S.C. 503).	FORM ARE P	UNISHABLE .S.C. 312 (A	BY FINE AN)(1) AND/OR F	D/OR IMPRIS	ONMENT (1) (47 U.S.C. 5	3 U.S.C. 1001 03).	AND/OR REV	OCATION